

STATE OF MONTANA
EDI Implementation Guide

ELECTRONIC DATA INTERCHANGE (EDI) TRADING PARTNER AGREEMENT
Third Party Administrator Attachment

Third party administrators often send reports to DLI/ERD for several insurers. Please complete the following for each insurer Federal Employer Identification Number (FEIN).

Insurance company name: _____

FEIN: _____

Insurance company name: _____

FEIN: _____

Insurance company name: _____

FEIN: _____

Insurance company name: _____

FEIN: _____

Insurance company name: _____

FEIN: _____